



State of Louisiana
Louisiana Department of Health
Bureau of Health Services Financing

VIA E-MAIL ONLY

January 18, 2017

Mr. Rick Born, CEO
Aetna Better Health
2400 Veterans Memorial Blvd., Suite 200
Kenner, LA 70062

Dear Rick:

RE: Notice of Action Regarding Quarterly Specialized Behavioral Health Network Reports

It has come to my attention that Aetna Better Health (ABH) has failed to submit accurate quarterly Specialized Behavioral Health (SBH) Network Reports as required by contract.

Section 18.10 of the contract requires the submission of these deliverables in the report format prescribed by LDH. Quarterly SBH Network Report submissions must include data accurately reported according to SBH designated levels of care, SBH provider types, provider identification numbers, LDH administrative regions, service location addresses inclusive of parishes, and populations served. Medicaid Behavioral Health, in collaboration with the Office of Behavioral Health, incorporated this topic into the bi-weekly "MCO Touch Base Calls," in which ABH has attended, beginning July 29, 2016. LDH has provided additional aids and guidance relative to unacceptable network report submissions via a Specialized Behavioral Health Provider Types, Specialties and Taxonomies Grid (attached), which is included in the *MCO System Companion Guide*, as well as detailed feedback associated with ABH's Q2 SBH Network Reports (attached).

ABH failed to incorporate this feedback and guidance into their report submissions resulting in incorrect submissions of Q3 SBH Network Reports (attached). Per Section 20.3 of the contract, failure to submit accurate standing and ad hoc reports carries a monetary penalty of \$2,000 per calendar day each report is late or deemed incorrect. ABH must submit accurate Q3 SBH Network Reports as set forth below to LDH in the format prescribed by LDH by **February 28, 2017**.

- Report 328 – Behavioral Health Provider Network Detail Report
- Report 336 – Behavioral Health Providers by Level of Care

- Report 338 – Behavioral Health Network Adequacy and GEO Access Review (Provider Type)
- Report 339 – Behavioral Health Prescriber Sufficiency Summary
- Report 348 – GeoAccess Mapping

If ABH cannot demonstrate compliance by **February 28, 2017**, penalties will be assessed in accordance with the contract terms outlined in the Table of Monetary Penalties as set forth below.

| | |
|---|--|
| Standing and <i>Ad Hoc</i> Reports | Two thousand dollars (\$2,000.00) per calendar day that a report is late or incorrect. |
|---|--|

Please do not hesitate to contact me if you have any questions.

Sincerely,



Steven Lazarus
Medicaid Deputy Director

SL/rm

Attachments

cc: Stacy Guidry
James Hussey, MD
Amanda Joyner
Robyn McDermott
Jen Steele
Darrell Montgomery
Kim Sullivan
File #: AET2-06

Janet Yeboah

From: Ann Donley
Sent: Thursday, September 29, 2016 10:18 AM
To: Mccurry, Peggy; Landry, Joanne
Cc: Carol Leven; Robyn McDermott
Subject: Aetna - LDH Provider Network reports review
Attachments: LDH Network Committee Review 2016 Q2 - ABH.XLSX

Good morning,

Please find LDH's comments below and spreadsheet attached regarding Provider Network reports. Any comments, revisions and/or resubmissions are due by COB Friday, 10/14/2016.

1. Behavioral Health Provider Network Detail Report (328) – 2016 Q2
Not accepted; however resubmit not required for Q2. Report for Q3 must address concerns noted for Q2 report. See attachment.
2. Behavioral Health Providers by Level of Care (336) – 2015 Q4, 2016 Q1, and 2016 Q2
Not accepted; however resubmit not required for Q2. Report for Q3 must address concerns noted for Q2 report. See attachment.
3. Behavioral Health Network Adequacy and Geo-Access Review Report (338) – 2015 Q4, 2016 Q1, and 2016 Q2
Not accepted; however resubmit not required for Q2. Report for Q3 must address concerns noted for Q2 report. See attachment.
4. Behavioral Health Prescriber Sufficiency Summary (339) – 2015 Q4, 2016 Q1, and 2016 Q2
Not accepted; however resubmit not required for Q2. Report for Q3 must address concerns noted for Q2 report. See attachment.
5. Behavioral Health Geo Access Density Summary (343) – 2015 Q4, 2016 Q1, and 2016 Q2
Not accepted; however resubmit not required for Q2. Report for Q3 must address concerns noted for Q2 report. See attachment.
6. GeoAccess Mapping (348) – 2016 Q2
Conditional acceptance: Gap Analysis and network plan due by 10/14 to demonstrate how ABH will enhance member access to the following LOCs, which appear to fall below contractual access standards via the data provided:
 - Region 3 - ASAM III.3 - Adults
 - Region 5 - ASAM III.3, III.5, III.7 - Adults; ASAM III.5 - Adolescent
 - Region 6 - ASAM III.7 - Adults; ASAM III.3, III.5 - Adolescent
 - Region 7 - ASAM III.3, III.5, III.7 - Adults; ASAM III.3 - Adolescent; PRTF
 - Region 8 - ASAM III.3, III.5 - Adults; PRTF
 - Region 9 - ASAM III.3, III.5 - Adults
 - Region 10 - no data provided; ABH should recheck to ensure data is stratified by appropriate region, and include LDH Region 10

Prescribers: ABH has not provided data or mapped for the general prescriber category inclusive of psychiatrists, APRN Rx and Psychologist Rx as requested. As such, the data is inconclusive and access/sufficiency of its network for prescribers cannot be determined.

Non-Prescribers: ABH should define "Rehab and Substance Abuse Facilities" and "Behavioral Health Providers Non-MD/DO," in Attachment E as unsure what this refers to.

Thank you,

Ann

Ann Donley, RN
Medicaid Behavioral Health Services
Behavioral Health Compliance Officer
(225) 342-7476 Desk
Ann.Donley@la.gov

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| AETNA SBHS NETWORK MONITORING REPORT - Q3 | | | | | | |
|---|---|---------------|--------|------------------|-------------|--|
| # | ISSUE | TYPE | REPORT | RESUBMISSION DUE | REVIEW SENT | NOTES |
| 1 | SBHS Defined LOC | LOC | 328 | 2/28/2017 | 1/18/2017 | Can appreciate wanting to list more specific LOCs than are called for with the SBHS defined LOC criteria, however please send a request to LDH to add a column for those classifications, rather than entering them in the LOC column. Examples include: Eating Disorder (with 5 separate age categories associated with it; leads to lots of duplication of providers when analyzing report), Outpatient Therapy Services Mental Health (and all age levels associated), Hospital Professional Services, Hospital Rural Prof Services, Outpatient Laboratory, Peer Services, Psychiatric Disorder Related Tx, etc. Please align these services with approved SBHS LOCs for this report as provided in the template definitions/resources. Please submit a request to LDH if ABH would like to incorporate additional service types in this report. If approved, Aetna will need to link those services to SBHS defined LOCs and provide a brief explanation for each service added. |
| 2 | Eating Disorder Child, Adolescent, Transition, Adult, Older Adult | LOC | 328 | 2/28/2017 | 1/18/2017 | Eating Disorder is not a SBHS approved LOC. LOC start age/end age appear identical regardless of service/LOC category creating duplication. Examples: eating disorder - child, adolescent, transition, adult, older adult all have same start age and end age. Please revise start age/end age for each. Eating disorders is only one example; there are many such entries in the LOC column. For eating disorders, what do these providers submit presumably at credentialing to afford them a special LOC classification of eating disorders for child, adol, adult, older adult, and/or transition? |
| 3 | Nurse Practitioner Group | PROVIDER TYPE | 328 | 2/28/2017 | 1/18/2017 | Individuals appear in this provider type category, yet seem unrelated to each other's practices based on NPI, network TIN, service addresses, etc. What constitutes theses individuals being categorized as "group"? Is not a recognized SBHS provider type; please utilize an appropriate SBHS provider type for providers notated with this label and revise in the report. |
| 4 | Network TIN | OTHER | 328 | 2/28/2017 | 1/18/2017 | Clarification is needed to explain network relationships between providers with linked Network TINs as other information provided, e.g. NPI, service address, etc. does not imply practice collaboration. Example: 463409234 is associated with Lisa Berkman, Rosalie Richard and Trinity Counseling, yet unable to determine relationship via NPI, services addresses, etc. in this report. Do these two individuals work at Trinity? This is just one example; there are numerous issues of this in the report. |
| 5 | Columns | FORMAT | 328 | 2/28/2017 | 1/18/2017 | Data is populated in columns inaccurately, e.g. business phone, business fax, parish, region do not contain correct information. |
| 6 | Individuals w/ Org LOC | LOC | 328 | 2/28/2017 | 1/18/2017 | Individuals should not be linked to organizational LOCs; e.g. Rosalie Richard with a LOC of ASAM Level III.3 (facility LOC and may not be rendered by an individual); if ABH wants to list licensed individuals with their associated agency, LOC linked to them should read "Roster." There are numerous entries with individuals linked to facility or organizational LOCs. LMHPs should only have a LOC associated with them if they practice as independent practitioners actively providing that service; otherwise, these practitioners' LOC line items should reflect "Roster Staff" if providing service(s) under an agency. The agency/facility itself should reflect the LOCs rather than the practitioner in these cases. Please revise. |
| 7 | Outpatient Laboratory Services | LOC | 328 | 2/28/2017 | 1/18/2017 | What type of laboratory services are LCSWs, MST Agencies and LPCs rendering? |
| 8 | Non-SBHS Provider Types | PRESCRIBER | 328 | 2/28/2017 | 1/18/2017 | Only prescribers who are SBHS provider types should appear on this report. Please remove Family Practitioners and Pediatric Emergency Physicians from the report. In the event these physicians are psychiatrists, please enroll them as such in the registry and associate them with this SBHS provider type. |

| # | ISSUE | TYPE | REPORT | RESUBMISSION DUE | REVIEW SENT | NOTES |
|-----|-------------------------------------|---------------|--------|------------------|-------------|--|
| 9 | Prescribers with "N" classification | PRESCRIBER | 328 | 2/28/2017 | 1/18/2017 | There are psychiatrists, neurologists, and medical psychologists whose prescriber status is marked as "No." Are those entries correct? |
| ### | Provider Types Associations | LOC | 328 | 2/28/2017 | 1/18/2017 | Please ensure LOCs are associated with appropriate Provider Types and vice versa. As an example, substance use residential levels of care (ASAM 3.1 - 3.7) should not be linked to MST providers, outpatient SU clinics, MHR agencies, individuals, etc. Residential ASAM LOCs should only be associated with PRTF Addiction or Substance Use Residential Facilities. ASAM level 4 should only be associated with hospitals and provider facilities licensed by Health Standards for this LOC. ASAM LOCs are not the only LOCs associated with inappropriate provider types in this report; other examples include Crisis Stabilization (only licensed respite, receiving centers, etc. may render CS), FQHC, Short Term Respite (again, specially licensed facilities), etc. Is this a linkage issue or a provider registry issue? |
| ### | CSoC Service LOCs | LOC | 328 | 2/28/2017 | 1/18/2017 | MCOs should not be reporting contracted providers as rendering CSoC waiver services. What are providers associated with these LOCs actually providing? Examples include providers associated with: Independent Living/Skills Building, Youth Support & Training, Wrap Around, Short-Term Respite, etc. |
| ### | CPST, CI and PSR | LOC | 328 | 2/28/2017 | 1/18/2017 | Rehab services of Community Psychiatric Support & Treatment, Crisis Intervention and Psychosocial Rehab may only be rendered in an organizational setting, and not by individuals or independent practitioners. Please revise. If the individual associated with these LOCs is licensed and working for an agency (as evidenced by an associated network TIN allocation on the report), the LOC should read "Roster." Only agencies should be associated with CPST, CI or PSR. |
| ### | Non-SBHS Provider Types | PROVIDER TYPE | 328 | 2/28/2017 | 1/18/2017 | The following are not approved SBHS provider types: Clinic or Group Practice; Durable Medical Equipment; Nurse Practitioner Groups; Nurse Practitioner - Behavior Analyst; Family Support; Family Practice; Registered Nurse; Pediatric Emergency Medicine; Pediatrics. Please revise. |
| ### | Active versus Potential to Provide | OTHER | 328 | 2/28/2017 | 1/18/2017 | This report should only contain entries for SBHS levels of care providers are actually contracted for, able to provide, and actually are providing. For example, a psychiatrist could render psych outpatient and inpatient services, and "could" work at an agency or facility that renders every other SBHS in LA as well, however discussion with the provider and review of claims encounters finds he only provides psych evaluation and medication management with a group of other psychiatrists. He shouldn't be listed on the report and linked to MST, ACT, ASAM Level IV, etc. solely on the possibility that someday he "may" work for an agency that provides this. This is a hypothetical example based on review of the report. As another example, nurse practitioners appear in the report for numerous and varying levels of care that they probably are not actually rendering. Another example - Acceptable Health Services, which is associated with MST provider type (can't be accurate) for all LOCs it provides, of which many are CSoC specific waiver services and should not be managed by ABH. Please review all entries and revise as appropriate. Consultation may be necessary if unclear. |
| ### | Absent SBHS LOCs | LOC | 328 | 2/28/2017 | 1/18/2017 | The following SBHS LOCs do not appear in this report: Inpatient Psych, Psych Outpatient. This is presumably due to misclassification of LOCs, however please review and revise. If ABH did have these SBHS LOCs available during the reporting period, please advise. |

| # | ISSUE | TYPE | REPORT | RESUBMISSION DUE | REVIEW SENT | NOTES |
|-----|--|---------------|--------|------------------|-------------|--|
| ### | Absent SBHS Provider Types | PROVIDER TYPE | 328 | 2/28/2017 | 1/18/2017 | The following SBHS provider types do not appear in this report: APRNs, Crisis Receiving Centers, Respite Care Agency, Center Based Respite, Behavioral Health Rehab Provider Agency, Assertive Community Treatment Agency, Therapeutic Group Home, Licensed Addiction Counselors (LACs), Licensed Marriage & Family Therapists (LMFTs), PRTFs (other than addiction), Distinct Part Psych Units (hospital), FQHC, DOs (rather than MD psychiatrists), Substance Use Residential Facilities. Does ABH not contract with these provider types? Please review and revise. |
| ### | Mental Health Clinics | PROVIDER TYPE | 328 | 2/28/2017 | 1/18/2017 | These provider types should not be rendering TGH treatment, Crisis Stabilization, ASAM Level 3 and above, etc. Are these clinics licensed through Health Standards to provide these intensive facility-based services? Please advise and revise as appropriate. If these providers are indeed TGHs, Crisis Receiving Centers/Center Based Respite/Respite Care Agencies (CS provider types) or TGHs, they should be enrolled as such in your provider registries and linked with those provider types in this report. Please review this type of situation for all providers. Only those specially licensed to render PRTF, Crisis Stabilization, ASAM 3 and above, TGH, TFC, Hospitals, etc. should be associated with these LOCs. As requested with Q2 feedback, please confirm that all providers listed as MHCs are indeed LGE clinics. |
| ### | Therapeutic Foster Care (TFC) | PROVIDER TYPE | 328 | 2/28/2017 | 1/18/2017 | The only LOCs associated with the one TFC reported are CPST and PSR. Why would a TFC be rendering these LOCs? And why only these? |
| ### | Problematic Associations | OTHER | 328 | 2/28/2017 | 1/18/2017 | Each provider entry should be reviewed and associated data for that line item confirmed. The report contains numerous entry errors. Ex: There are five licensed PRTFs in LA, yet ABH reports only one; the one provider linked to a PRTF classification (and it is addiction classified at that), renders MHR and ASAM Level 1 services only per this report. The report is riddled with these types of errors. |
| ### | Inconsistent Data across Reports | OTHER | 328 | 2/28/2017 | 1/18/2017 | Likely due to inaccurate provider registry and unapproved report template revisions. |
| ### | Failure to implement revisions requested in Q2 | OTHER | 328 | 2/28/2017 | 1/18/2017 | ABH has ignored previous requests for revisions based on feedback and TA provided for their Q2 network reports. |
| ### | N/A is a not an acceptable entry; Out-of-State | REGION | 328 | 2/28/2017 | 1/18/2017 | As indicated in Q2 feedback, all line entries must have a LDH region associated with them. ABH may enter "Out-of-State" for those providers whose service addresses are not in Louisiana, however with the exception of residential services, a justification/explanation must be submitted with LOCs being provided at all service locations out-of-state. ABH may send this justification/explanation via email when submitting this report. |
| ### | PRTF | LOC | 328 | 2/28/2017 | 1/18/2017 | Of the 10 providers listed as providing PRTF LOCs, none are licensed by Health Standards as required. Please review these providers and associate them with the LOCs they actually render. If these providers are rendering PRTF levels of care, advise LDH immediately. There should be no individuals associated with PRTF level of care. Please revise. |
| ### | TGH | LOC | 328 | 2/28/2017 | 1/18/2017 | Facilities/agencies rendering Therapeutic Group Home (TGH) level of care may not be MHCs/LGEs or MST Agencies; they must be licensed through Health Standards as TGHs. Please review provider types associated with TGH and TFC, confirm accuracy or revise. Of the 3 provider agencies listed with TGH LOC, only one is licensed by HSS. Please review and correct report. If ABH has/had members receiving TGH services from Harper's Counseling or VOA, please advise LDH immediately. |

| # | ISSUE | TYPE | REPORT | RESUBMISSION DUE | REVIEW SENT | NOTES |
|-----|---|------------------|--------|------------------|-------------|---|
| ### | TFC | LOC | 328 | 2/28/2017 | 1/18/2017 | Please confirm that the four agencies/service locations reported as providing therapeutic foster care LOC are actively licensed by DCFS to do so. Please also review their associated provider types and either confirm they are accurate or revise. |
| ### | Not Accepted | DISPOSITION | 328 | 2/28/2017 | 1/18/2017 | This report is not accepted and requires review and correction. |
| ### | OBH Recommendation | REMEDATION | 328 | 2/28/2017 | 1/18/2017 | 1) Resubmission of report due February 28, 2017; 2) Notice to Cure Letter; 3) Imposition of monetary penalties with failure to submit an accurate resubmission by deadline: \$2,000 per calendar day that the resubmitted report is late or incorrect. (Contract Reference: 20.3.2 - Table of Monetary Penalties) |
| ### | Unable to gage access, adequacy or accuracy | TEMPLATE REVISED | 336 | 2/28/2017 | 1/18/2017 | Please provide the written approval received from LDH to revise this template. In its current state, we are unable to analyze access and sufficiency of ABH's network. |
| ### | # provider counts per LOC | COUNTS | 336 | 2/28/2017 | 1/18/2017 | The report is fraught with inaccuracies. Please check each count by LOC and by LDH region and confirm via signed attestation the reported counts are accurate or revise. Review of this report against 328 - Provider Detail reveals the counts reported are in some cases completely inaccurate and in others are duplicative. As an example, ASAM Level 1 (Outpt SU) is reported as having 21 providers in Region 1 - MHSD. Comparing against 328 Provider Detail Report, one does find 21 line entries for ASAM Level 1 in Region 1, however Bennett Nwankpa is listed seven (7) times, and the other providers listed have numerous errors associated with their provider typing making it unclear whether the rest of the data is accurate. The providers listed as MHCs don't appear to be LGE clinics (the only providers who should be associated with the MHC provider type). In addition, there are no LGEs reported with this LOC in Report 328, which is unlikely, further calling into question the counts provided in the 336 LOC report. The CPST count for Region 3 - SCLHSA reflects 14 providers; compared against 328 report one finds 14 listed entries, however there are duplicates reported and unclear why Shawane Thomas, listed as a CNS, would be providing CPST (reported 4 times) especially outside of any agency setting (which is required). These are just two examples. |
| ### | Failure to review and revise as requested in Q2 | PRTF | 336 | 2/28/2017 | 1/18/2017 | In Q2, LDH sent feedback to ABH indicating there are only five (5) licensed PRFTs in the State of LA, however ABH reported having 22 providers rendering this LOC in the state. LDH requested explanation and expected revisions in the Q3 report. On review of Q3, ABH reports having a total of 49 providers in the state rendering PRTF LOCs. This is unlikely. If ABH is contracted with 49 agencies to provide this LOC, please immediately advise LDH and provide proof of HSS licensure for each provider. In the more likely event that the provider counts for PRTF LOC are inaccurate, please correct. |
| ### | Not Accepted | DISPOSITION | 336 | 2/28/2017 | 1/18/2017 | This report is not accepted and requires review and correction. |
| ### | OBH Recommendation | REMEDATION | 336 | 2/28/2017 | 1/18/2017 | 1) Resubmission of report due February 28, 2017; 2) Notice to Cure Letter; 3) Imposition of monetary penalties with failure to submit an accurate resubmission by deadline: \$2,000 per calendar day that the resubmitted report is late or incorrect. (Contract Reference: 20.3.2 - Table of Monetary Penalties) |
| ### | Unable to gage access, adequacy or accuracy | TEMPLATE REVISED | 338 | 2/28/2017 | 1/18/2017 | Please provide the written approval received from LDH to revise this template. In its current state, we are unable to analyze access and sufficiency of ABH's network. |

| # | ISSUE | TYPE | REPORT | RESUBMISSION DUE | REVIEW SENT | NOTES |
|-----|--|------------------|--------|------------------|-------------|---|
| ### | Inconsistent Data across Reports | OTHER | 338 | 2/28/2017 | 1/18/2017 | Counts for some provider types are significantly different than that reported in Q2's 338 report. Please review each count for each provider type and region to ensure the reported data is accurate. As an example, in Q2 ABH reported 397 psychiatrists statewide, and in Q3 ABH reports 1,258. This seems unlikely. As another example, in Q2 ABH reported 33 total unduplicated MST agencies statewide, and in Q3 ABH reports 1,638 unique MST agencies statewide. Please review all counts by provider type and region and ensure accurate reporting of numbers in the resubmitted report. Please compare these counts against report 328 (provider detail), provider registries, etc. to ensure all sources are reflective of the same information. |
| ### | Not Accepted | DISPOSITION | 338 | 2/28/2017 | 1/18/2017 | This report is not accepted and requires review and correction. |
| ### | OBH Recommendation | REMEDIATION | 338 | 2/28/2017 | 1/18/2017 | 1) Resubmission of report due February 28, 2017; 2) Notice to Cure Letter; 3) Imposition of monetary penalties with failure to submit an accurate resubmission by deadline: \$2,000 per calendar day that the resubmitted report is late or incorrect. (Contract Reference: 20.3.2 - Table of Monetary Penalties) |
| ### | Inconsistent Data across Reports | COUNTS | 339 | 2/28/2017 | 1/18/2017 | This report shows a total of 430 distinct APRNs with prescriptive authority, 219 distinct psychiatrists and 8 distinct medical psychologists. However, Report 338 on Provider Types indicates "0" APRNs (ABH removed the label from the template), therefore assuming the 615 reported under CNS is a likely comparison (please confirm), an unduplicated total of 1,367 psychiatrists (ABH reported 1,258 under psychiatrist and inserted a label for psychiatry/neurology totaling 109), and unduplicated count of 8 medical psychologists. Per Report 328 Provider Detail, Marc Zimmerman is the only medical psychologist in the state, listed eight times. The date reported in 339 is unreliable and doubtful it is valid. Please review and revise. |
| ### | Failure to implement revisions requested in Q2 | OTHER | 339 | 2/28/2017 | 1/18/2017 | LDH requested ABH accurately populate fields in the TOTAL column; however no totals appear in submitted report. |
| ### | Not Accepted | DISPOSITION | 339 | 2/28/2017 | 1/18/2017 | This report is not accepted and requires review and correction. |
| ### | OBH Recommendation | REMEDIATION | 339 | 2/28/2017 | 1/18/2017 | 1) Resubmission of report due February 28, 2017; 2) Notice to Cure Letter; 3) Imposition of monetary penalties with failure to submit an accurate resubmission by deadline: \$2,000 per calendar day that the resubmitted report is late or incorrect. (Contract Reference: 20.3.2 - Table of Monetary Penalties) |
| ### | Unable to gage access, adequacy or accuracy | VALIDITY OF DATA | 348 | 2/28/2017 | 1/18/2017 | Please provide the methodology used to complete this report inclusive of source(s) for data. As all other ABH reports contain inaccurate data, LDH is unable to assume data provided in this report is accurate. |
| ### | Radius Markers | MAPS | 348 | 2/28/2017 | 1/18/2017 | Please utilize the radius markers rather than a point/pinpoint in reflecting access via the maps. Radius markers allow for visual illustration of geo-areas falling within and outside of access standards. That area not contained within a circle/radius marker indicates lack of access to members in that geographic territory. |
| ### | 10 LDH Regions | REGIONS | 348 | 2/28/2017 | 1/18/2017 | As indicated in Q2 feedback, there are 10 LDH administrative regions, however ABH stratified data using nine (9) regions. Please stratify utilizing the 10 LDH regions. |
| ### | Not Accepted | DISPOSITION | 348 | 2/28/2017 | 1/18/2017 | This report is not accepted and requires review and correction. |
| ### | OBH Recommendation | REMEDIATION | 348 | 2/28/2017 | 1/18/2017 | 1) Resubmission of report due February 28, 2017; 2) Notice to Cure Letter; 3) Imposition of monetary penalties with failure to submit an accurate resubmission by deadline: \$2,000 per calendar day that the resubmitted report is late or incorrect. (Contract Reference: 20.3.2 - Table of Monetary Penalties) |

| Service | Provider Description | PT | PS | PSS | Taxonomy | Taxonomy Description |
|--|---|----|----|-----|------------|---|
| Crisis Stabilization | Respite Care Services Agency/Center Based Respite | AE | 8E | | 385HR2055X | Respite Care Facility, Mental Illness |
| | Crisis Receiving Center | AF | 8E | | 261QM0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health |
| | Mental Health Rehabilitation Agency (Legacy MHR) | 77 | 78 | | 251S00000X | Agencies Community/Behavioral Health |
| | Mental Health Clinic (Legacy MHC) - Reserved for LGEs | 74 | 70 | 8E | 261QM0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health |
| | Behavioral Health Rehab Provider Agency (Non-Legacy MHR) | AG | 8E | | 251S00000X | Agencies Community/Behavioral Health |
| | Assertive Community Treatment Team (ACT Services) | AA | 8E | | 251S00000X | Agencies Community/Behavioral Health |
| | Multi-Systemic Therapy Agency (MST Services) | 12 | 5M | | 251S00000X | Agencies Community/Behavioral Health |
| Therapeutic Group Home | Therapeutic Group Home | AT | 5X | | 320800000X | Community Based Residential Treatment Facilities, Mental Illness |
| | Substance Abuse and Alcohol Abuse Center (Outpatient) | 68 | 70 | | 261QR0800X | Ambulatory Health Care Facilities/Clinic/Center, Substance Use Disorder |
| | Mental Health Clinic (Legacy MHC) - Reserved for LGEs | 74 | 70 | | 261QM0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health |
| Addiction Services Outpatient | Licensed Addiction Counselor | AJ | 8E | | 101VA0400X | Behavioral Health & Social Service Providers Counselor Addiction Substance Use Disorder |
| | Psychiatric Residential Treatment Facility | 96 | 98 | | 323P00000X | Residential Treatment Facilities Psychiatric Residential Treatment Facility |
| | Psychiatric Residential Treatment Facility Addiction | 96 | 8U | | 323P00000X | Residential Treatment Facilities Psychiatric Residential Treatment Facility |
| Psychiatric Residential Treatment Facility | Psychiatric Residential Treatment Facility Other Specialization | 96 | 8R | | 323P00000X | Residential Treatment Facilities Psychiatric Residential Treatment Facility |
| | Psychiatric Residential Treatment Facility Hospital Based | 96 | 8L | | 323P00000X | Residential Treatment Facilities Psychiatric Residential Treatment Facility |
| | Free Standing Psychiatric Hospital | 64 | 86 | | 283Q00000X | Hospitals/Psychiatric Hospital |
| Psychiatric Inpatient | Distinct Part Psychiatric Unit | 69 | 86 | | 273R00000X | Hospital Units/Psychiatric Unit |
| | Mental Health Rehabilitation Agency (Legacy MHR) | 77 | 78 | | 251S00000X | Agencies Community/Behavioral Health |
| | Mental Health Clinic (Legacy MHC) - Reserved for LGEs | 74 | 70 | | 261QM0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health |
| | Psychologist - Clinical | 31 | 6A | | 103IC0700X | Behavioral Health & Social Service Providers/Psychologist, Clinical |
| | Psychologist - Counseling | 31 | 6B | | 103IC1300X | Behavioral Health & Social Service Providers/Psychologist, Counseling |
| | Psychologist - School | 31 | 6C | | 103IS0200X | Behavioral Health & Social Service Providers/Psychologist, School |
| | Psychologist - Developmental | 31 | 6D | | 103IM1800X | Behavioral Health & Social Service Providers/Psychologist, Developmental |
| | Psychologist - Non-Declared (General) | 31 | 6E | | 103I00000X | Behavioral Health & Social Service Providers/Psychologist |
| | Psychologist - Other | 31 | 6F | | 103I00000X | Behavioral Health & Social Service Providers/Psychologist |
| | Medical Psychologist | 31 | 6G | | 103IP0016X | Behavioral Health & Social Service Providers/Psychologist |
| | Behavioral Health Rehab Agency (Non-Legacy MHR) | AG | 8E | | 251S00000X | Agencies Community/Behavioral Health |
| | Substance Abuse and Alcohol Abuse Center (Outpatient) | 68 | 70 | | 261QR0800X | Ambulatory Health Care Facilities/Clinic/Center, Substance Use Disorder |
| | School Based Health Center | 38 | 70 | | 261QH0100X | Ambulatory Health Care Facilities/Clinic/Center, School Based Health Center |
| | Federally Qualified Health Center | 72 | 42 | 8E | 261QF0400X | Ambulatory Health Care Facilities/Clinic/Center, Federally Qualified Health Center |
| | Rural Health Clinic | 79 | 94 | 8E | 261QR1300X | Ambulatory Health Care Facilities/Clinic/Center, Rural Health |
| | Rural Health Clinic | 87 | 94 | 8E | 261QR1300X | Ambulatory Health Care Facilities/Clinic/Center, Rural Health |
| | Licensed Clinical Social Worker | 73 | 73 | | 104IC0700X | Behavioral Health & Social Service Providers/ Social Worker, Clinical |
| | Licensed Professional Counselor | AK | 56 | | 101YP2500X | Behavioral Health & Social Service Providers Counselor Professional |
| | Licensed Marriage and Family Therapist | AH | 8E | | 106H00000X | Behavioral Health & Social Service Providers Marriage & Family Therapist |
| | Doctor of Osteopathic Medicine | 19 | 26 | | 2084P0800X | Allopathic & Osteopathic Physicians/Psychiatry |
| | Doctor of Osteopathic Medicine | 19 | 27 | | 2084N0400X | Allopathic & Osteopathic Physicians/Psychiatry and Neurology, Neurology |
| | Psychiatrist | 20 | 26 | | 2084P0800X | Allopathic & Osteopathic Physicians/Psychiatry |
| | Advanced Practice Registered Nurse | 78 | 26 | | 364SP0808X | Physician Assistants & Advanced Practice Nursing Providers/Clinical Nurse Specialist, Psychiatric/Mental Health |
| | Clinical Nurse Specialist | 93 | 26 | | 364SP0808X | Physician Assistants & Advanced Practice Nursing Providers/Clinical Nurse Specialist, Psychiatric/Mental Health |
| | Physician Assistant | 94 | 26 | | 364SP0808X | Physician Assistants & Advanced Practice Nursing Providers/Clinical Nurse Specialist, Psychiatric/Mental Health |
| Substance Use Residential | Substance Use Residential Treatment Facility | AZ | 8U | | 324S00000X | Residential Treatment Facilities Substance Abuse Rehabilitation Facility |

| Service | Provider Description | PT | PS | PSS | Taxonomy | Taxonomy Description | Additional Clarification |
|---|---|----|----|-----|-------------|--|--|
| Behavioral Health Rehabilitation Services | | | | | | | <p>1) Should be reserved for Legacy MHRs enrolled with Medicaid prior to managed care of Louisiana's specialized behavioral health services on 3/1/12.</p> <p>2) MCOs may obtain a list of Legacy MHR Agencies through Medicaid.</p> <p>3) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> <p>1) Reserved for Local Governing Entities (LGEs) located in each Louisiana Department of Health (LDH) administrative region; sometimes referred to as Legacy Mental Health Clinics.</p> <p>2) Clinics and service locations associated with:</p> <p>LDH Region 1 - Metropolitan Human Services District (MHD);</p> <p>LDH Region 2 - Capital Area Human Services District (CAHSD);</p> <p>LDH Region 3 - South Central LA Human Services Authority (SCLHSA);</p> <p>LDH Region 4 - Acadiana Area Human Services District (AAHSD);</p> <p>LDH Region 5 - Imperial Calcasieu Human Services Authority (ICLSA);</p> <p>LDH Region 6 - Central LA Human Services District (CLHSD);</p> <p>LDH Region 7 - Northwest LA Human Services District (NWLHSD);</p> <p>LDH Region 8 - Northeast Delta Human Services Authority (NDHSA);</p> <p>LDH Region 9 - Florida Parishes Human Services Authority (FPHSA); and</p> <p>LDH Region 10 - Jefferson Parish Human Services Authority (JPHSA).</p> <p>1) Will not be enrolled with Medicaid as Legacy MHRs.</p> <p>2) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> |
| | Mental Health Rehabilitation Agency (Legacy MHR) | 77 | 78 | | 251S00000X | Agencies Community/Behavioral Health | |
| | | | | | | | |
| | Mental Health Clinic (Legacy MHC) - Reserved for LGEs | 74 | 70 | 8E | 261Q0M0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health | <p>1) Will not be enrolled with Medicaid as Legacy MHRs.</p> <p>2) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> <p>1) Should be reserved for Legacy MHRs enrolled with Medicaid prior to managed care of Louisiana's specialized behavioral health services on 3/1/12.</p> <p>2) MCOs may obtain a list of Legacy MHR Agencies through Medicaid.</p> <p>3) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> <p>1) Reserved for Local Governing Entities (LGEs) located in each Louisiana Department of Health (LDH) administrative region; sometimes referred to as Legacy Mental Health Clinics.</p> <p>2) Clinics and service locations associated with:</p> <p>LDH Region 1 - Metropolitan Human Services District (MHD);</p> <p>LDH Region 2 - Capital Area Human Services District (CAHSD);</p> <p>LDH Region 3 - South Central LA Human Services Authority (SCLHSA);</p> <p>LDH Region 4 - Acadiana Area Human Services District (AAHSD);</p> <p>LDH Region 5 - Imperial Calcasieu Human Services Authority (ICLSA);</p> <p>LDH Region 6 - Central LA Human Services District (CLHSD);</p> <p>LDH Region 7 - Northwest LA Human Services District (NWLHSD);</p> <p>LDH Region 8 - Northeast Delta Human Services Authority (NDHSA);</p> <p>LDH Region 9 - Florida Parishes Human Services Authority (FPHSA); and</p> <p>LDH Region 10 - Jefferson Parish Human Services Authority (JPHSA).</p> <p>1) Will not be enrolled with Medicaid as Legacy MHRs.</p> <p>2) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> |
| Outpatient Therapy | | | | | | | |
| | Mental Health Rehabilitation Agency (Legacy MHR) | 77 | 78 | | 251S00000X | Agencies Community/Behavioral Health | |
| | | | | | | | |
| | Mental Health Clinic (Legacy MHC) - Reserved for LGEs | 74 | 70 | | 261Q0M0801X | Ambulatory Health Care Facilities/Clinic/Center, Mental Health | <p>1) Will not be enrolled with Medicaid as Legacy MHRs.</p> <p>2) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> <p>1) Reserved for Local Governing Entities (LGEs) located in each Louisiana Department of Health (LDH) administrative region; sometimes referred to as Legacy Mental Health Clinics.</p> <p>2) Clinics and service locations associated with:</p> <p>LDH Region 1 - Metropolitan Human Services District (MHD);</p> <p>LDH Region 2 - Capital Area Human Services District (CAHSD);</p> <p>LDH Region 3 - South Central LA Human Services Authority (SCLHSA);</p> <p>LDH Region 4 - Acadiana Area Human Services District (AAHSD);</p> <p>LDH Region 5 - Imperial Calcasieu Human Services Authority (ICLSA);</p> <p>LDH Region 6 - Central LA Human Services District (CLHSD);</p> <p>LDH Region 7 - Northwest LA Human Services District (NWLHSD);</p> <p>LDH Region 8 - Northeast Delta Human Services Authority (NDHSA);</p> <p>LDH Region 9 - Florida Parishes Human Services Authority (FPHSA); and</p> <p>LDH Region 10 - Jefferson Parish Human Services Authority (JPHSA).</p> <p>1) Will not be enrolled with Medicaid as Legacy MHRs.</p> <p>2) Generally render one or more of the following services, though may also render outpatient therapy, etc.</p> <p>a) Psychosocial Rehab (PSR);</p> <p>b) Crisis Intervention (CI) – not to be confused with Crisis Stabilization (a licensed respite provider);</p> <p>c) Community Psychiatric Support & Treatment (CPST) - Includes the EBP's FFT and Homebuilders. *</p> |
| | Behavioral Health Rehab Agency (Non-Legacy MHR) | AG | 8E | | 251S00000X | Agencies Community/Behavioral Health | |

* Evidence Based Practices under CPST consist of: Assertive Community Treatment (ACT), Functional Family Therapy (FFT), Homebuilders and Multi-Systemic Therapy. ACT and MST have their own PT/PS codes; providers rendering these services should be coded accordingly as depicted in the State Coding Grid (Tab 1).